

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90082 014 ***150.00

DOCUMENT # P94000020903

1. Entity Name

D.P. PRODUCTS COMPANY

Principal Place of Business

**111 COMMODORE DRIVE
JUPITER FL 33477**

Mailing Address

**111 COMMODORE DRIVE
JUPITER FL 81632-0371**

2. Principal Place of Business

4001 CAPTAINS WAY

Suite, Apt. #, etc.

3. Mailing Address

4001 CAPTAINS WAY

Suite, Apt. #, etc.

City & State

JUPITER, FLORIDA

City & State

JUPITER, FLORIDA

4. FEI Number

65-0474457

Applied For

Not Applicable

Zip

33477

Country

PALM BEACH

Zip

33477

Country

PALM BEACH

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PELTZ, DOREE HARR
111 COMMODORE DRIVE
JUPITER FL 33477**

7. Name and Address of New Registered Agent

**PELTZ, DOREE HARR
4001 CAPTAINS WAY**

JUPITER

FL

33477

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-20-2000

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **PELTZ, DOREE H**
STREET ADDRESS **111 COMMODORE DR**
CITY-ST-ZIP **JUPITER FL 33477**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRES** ☒ Change ☐ Addition
NAME **PELTZ, DOREE HARR**
STREET ADDRESS **4001 CAPTAINS WAY**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

DOREE HARR PELTZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-20-2000 561-744-2863